

ATTACHMENT 4

Area Authority/County Program Local Business Plan (LBP): Quarterly Reports

Area Authority/County Program	
Area Authority/County Program Director's Name	
LBP Contact Person	
DMH AREA AUTHORITY/COUNTY PROGRAMS Team Liaison	
Submission Date / Qtr	

Summary Of Quarterly Reports: As stated in Communication Bulletin #2, Local Business Plan Submission and Area Authority/County Programs Certification, each Area Authority/County Program is required to provide quarterly updates. The Area Authority/County Program can choose to use the matrix format as identified in Communication Bulletin #2, if using the matrix format for LBP submission or can use the narrative format. At the end of each fiscal year, the Area Authority/County Program should review / revise and update the three year strategic plan base upon outcomes achieved for the past year and new goals established. The Area Authority/County Program should always be working toward FULL implementation of the LBP, developing into an Area Authority/County Programs, and implementing the Communication Bulletin(s) released for the past year. Quarterly reports need to be submitted no later than 30 days after the end of the quarter.

Instructions: For each chapter of the LBP, provide a narrative summary detailing actions completed and barriers toward implementation of the LBP for the past quarter. As Communication Bulletins are released, the Area Authority/County Program will complete the section identified for the Communication Bulletins on the quarterly report, indicating a plan for implementation and update quarterly until the Communication Bulletin is added into the annual 3-year strategic plan for purposes of Implementation. The Comment Section is intended to provide the Area Authority/County Program the opportunity to address any concerns, barriers, technical assistance needs, support needs, or suggestions for the Division that will further support the Area Authority/County Program's work towards implementation of becoming a Local Management Entity (Area Authority/County Programs). Please attach updated copies of the 3 year strategic plan for each quarterly reporting period. If no changes have been made to the strategic planning document, no attachment is necessary.

I. Planning
Narrative:

I. a. CFAC Involvement (Discuss CFAC work, involvement, and issues identified for the past quarter.)
Narrative:

II. Governance, Management, and Administration
Narrative:

III. Qualified Provider Network Development
Narrative:

IV. Service Management
Narrative:

V. Access to Care
Narrative:

VI. Service Monitoring and Oversight: Quality Management
Narrative:

VII. Evaluation
Narrative:

VIII. Financial Management and Accountability
Narrative:

IX. Information Systems and Data Management
Narrative:

X. Collaboration
Narrative:

Communication Bulletin #003 Management of State Plan Target and Non-Target Populations
Narrative:

Communication Bulletin #004 Housing
Narrative:

Communication Bulletin #005 Q&A for County Commissioners/Managers
Narrative:

Communication Bulletin #006 Community Hospitals
Narrative:

Communication Bulletin #007 Best Practice - Adult Mental Health
Narrative:

Communication Bulletin #0 8
Narrative:

Communication Bulletin #09
Narrative:

Comment Section: (Area Authority/County Program to address any concerns, barriers, needs for technical assistance, support required, or suggestions for the Division that will further support work towards implementation of becoming a full Area Authority/County Programs).
Narrative:

Area Authority/County Program Director's Signature	
Date	